

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 4/4/03.

## I. DISPUTE

Whether there should be additional reimbursement for 63075 – anterior diskectomy and 63076 – cervical diskectomy, each additional interspace, dated 6/19/02 and denied on the basis of global to another service.

## II. RATIONALE

Commission Advisory 97-01 states, “Preparation of the arthrodesis site, such as minimal diskectomy, is not separately billable and is considered to be part of the arthrodesis procedure. A full diskectomy procedure may be billed separately if not included as part of the global procedure for arthrodesis.” According to the Operative Report, dated 6/19/02, the disputed diskectomies at C4-C5 and C6-C7 performed by the requestor are full diskectomies and ;therefore, not global and may be billed separately.

DOS	CPT CODE	Billed	Paid	EOB Denial Code	MARS (Maximum Allowable Reimbursement)	Reference	Rationale
6/19/02	63075	\$4,765.00	\$00.00	G	\$2,832.00	Commission Advisory 97-01  MFG, SGR (I)(D)  1994 Global Service Data for Orthopaedic Surgery	Per Advisory 97-01 full diskectomies are reimbursable. The operative reports these as full diskectomies and therefore, reimbursement of \$1,416.00 (50% of the MAR of the secondary procedure) is recommended.
	63076	\$1,340.00	\$00.00	G	\$607.00	See above.	See above. Per MFG, SGR, (I)(D)(2), this code shall not be reduced by the Multiple Procedure Rule. Reimbursement of \$607.00 is recommended.
TOTAL		\$6,105.00	\$00.00		\$3,439.00		The requestor is entitled to reimbursement of \$2,023.00.

#### **IV. DECISION & ORDER**

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for 63075 and 63076 in the amount of **\$2,023.00**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$2,023.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 13<sup>th</sup> day of October, 2004.

Noel L. Beavers  
Medical Dispute Resolution Officer  
Medical Review Division

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